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HOW



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Label 11-F June 2002



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ORIGIN (POSTAL USE ONLY)			DELIVERY (POSTAL USE ONLY)		
PO ZIP Code	Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> Second	Flat Rate Envelope	Delivery Attempt	Time	Signature
Date In Mo. Day Year	<input type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Postage	Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Time In <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee	Delivery Date	Time	Employee Signature
Weight lbs. ozs.	Int'l Alpha Country Code	COD Fee Insurance Fee	Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials	Total Postage & Fees	Customer Signature		
CUSTOMER USE ONLY			CUSTOMER USE ONLY		
METHOD OF PAYMENT: Express Mail Corporate Acct. No.			Federal Agency Acct. No. or Postal Service Acct. No.		
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